

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State Nevada

Attachment 4.19-B

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3. Laboratory and pathology services deemed to be Nevada Medicaid covered benefits will be paid at:

- a. For codes 80000-89999, the lower of billed charges not to exceed ~~95~~50% of the rate allowed by the 2014 Medicare Clinical Diagnostic Laboratory Fee Schedule for Nevada;
- b. Allowed laboratory and pathology codes/services outside of the ranges listed in 3.1 and 3.2 or not listed in the Medicare Clinical Diagnostic Laboratory Fee Schedule for Nevada will be paid in accordance with other sections of this State Plan based on rendering provider type;
- ~~c. Newly developed laboratory and pathology codes that fall within the code range 80000-89999 will be priced at lower of billed charges not to exceed 50% of the rate allowed by the Medicare Clinical Diagnostic Laboratory Fee Schedule for Nevada for the year that the code(s) is listed in the fee schedule;~~
- ~~d.c.~~ For “BR” (by report) and “RNE” (relativity not established) codes that fall within the code range 80000-89999, the payment will be set at 62% of billed charges; or
- ~~e.d.~~ Contracted or negotiated amount.